File Original and First Copy with Department of Ecology Second Copy—Owner's Copy Third Copy—Driller's Copy

WATER WELL REPORT

32/2E/23 F Start Card No. _ 70363_

Water Right Permit No. ___

STATE OF WASHINGTON

Third	Copy—Driller's Copy	Water Right Permit No.		
(1)	OWNER: Name MARK CLEARY	Address 26915 - 787 DUE N.W	·	
(2)	LOCATION OF WELL: County ISLAND	SE " NUL Sec 23 13		
	STREET ADDDRESS OF WELL (or negress address) 628 W.	N CAMANO DR CAMANO IS	-, Wa. 982	
(3)	PROPOSED USE: Domestic Industrial Municipal Dewater Test Well COther	(10) WELL LOG or ABANDONMENT PROCEDURE DESCRIPTION Formation: Describe by color, character, size of material and structure, and show		
(4)	TYPE OF WORK: Owner's number of well	thickness of aquilers and the kind and nature of the material in each with at least one entry for each change of information.	:n stretum penetrateo,	
		MATERIAL	FROM TO	
	Deepened	100 SOIL	0 50	
	Reconditioned Rotary Jetted	Leg grayet & Doulders	A 121	
(5)	DIMENSIONS: Diameter of well inches.	BROWN CLAY & GEOVEL	62 66	
	Drilled 66 feet. Depth of completed well 66 ft.			
	CONSTRUCTION DETAILS:			
	Casing installed			
	Perforations: Yes No P			
	Type of perforator used			
	SIZE of perforationsin. byin.			
	perforations fromft. toftperforations fromft. toft.			
	Screens: Yes No			
	Manufacturer's Name	RECEIVED		
	Type	OCT 0 9 1990		
	Diam. Slot alze from 11. to 11.			
	Gravel packed: Yes No Size of gravel	DEPT. OF ECOLOG	17	
	Surface seal: Yes To what depth?ft.			
	Material used in seal			
	Did any strata contain unusable water? Yes No Per No Per No No Per No Pe			
	Method of sealing strate off			
(7)	PUMP: Menufacturer's Name LLUKUONU			
	Туре:			
(8)	WATER LEVELS: Land-surface elevation above mean sea level			
	Static level 4 t. below top of well Date 8/29/90			
	Artesian pressure lbs per equare inch Date			
	Artesian water is controlled by(Cap, valve, etc.))	Work started 8/23/ 19/Completed	128/ 1990	
(9)	WELL TESTS: Drawdown is amount water level is lowered below static level	Work station		
	Was a pump test made? Yes No M If yes, by whom?	WELL CONSTRUCTOR CERTIFICATION:		
	Yield: Yai./miii. wiiii K. C. Caraca	l constructed and/or accept responsibility for construction of this well, and its compliance with all Washington well construction standards.		
	9 0 0 0	Materials used and the information reported above are true to my best		
	Recovery data (time taken as zero when pump turned off) (water level measured from well top to water level) Time Water Level Time Water Level Time Water Level	NAME WATKING WELL DOLLING COPPORATION), (TYPE OR PRINT)		
		Address 556, N SUNSET DR. CAMPINO IS. U		
	Date of test	(Signed) Adix Murph Ricense No. 323		
	Bailer teat gal./min. with ft. drawdown after hrs.	(Signed) (WELL DRILLER)		
	Airteat gal./min. with stem set at ft. for hrs.	Registration Kiw D/34/2 Date 9/5/ 1990		
	Artesian flow g.p.m. Date P.m. Date Temperature of water Was a chemical analysis made? Yes No.			
	Temperature of water Was a chemical analysis made? Yes No	(USE ADDITIONAL SHEETS IF NECES	SAHY)	